

Health Care Cost-Effective

A Message From the **Director**

What a great pleasure it is to be taking care of patients on the inpatient medical service

at Harbor-UCLA Medical Center. This has been my first experience seeing patients at Harbor and I couldn't be more impressed with the hard work and dedication of the staff: the nurses, the physicians, the pharmacists, social workers, technicians, ward clerks, facility staff, and administrators — all the people who make a hospital run successfully. I have been especially grateful to the many people at Harbor who have helped me find my way. Many times I have been lost, searching for a patient in a ward I can't find, when someone saw me looking dazed at my long list of patients and nudged me in the right direction. And I greatly enjoy being with our patients and their families. It is exhausting. The service is busy, and our hospitalized patients need a lot of care. But it gives me great pride to see how the Harbor staff pull together to care for our patients. I have previously worked on the inpatient service at LAC+USC. It is my goal to work at all our hospitals. Meanwhile, special thanks to all the people at Harbor who have made me feel so welcome at

the hospital, and my colleagues at 313

Figueroa who have helped pick up the

slack of administrative work so that I

could devote myself for two weeks to

the most rewarding part of my job.

Best wishes.



No Power Shortage at MLK MACC

By Michael Wilson

Every Monday afternoon, patients gath- For these patients, coming together er at the Martin Luther King, Jr Multi-Service Ambulatory Care Center. But instead of finding the usual crowded waiting room followed by a brief clinician visit, these patients encounter something new -- a POWER group visit. They meet in groups of 20 or more with a multi-disciplinary health care team to work through their individual challenges with obesity. The POWER (Preventing Obesity With Eating Right) group visit is the joint vision of endocrinologist Dr. Theodore Friedman and former medical director Dr. Angela Nossett to address the obesity epidemic in South Los Angeles where residents contend with limited healthy food options and lack of green space. These environmental factors combined with genetic predisposition have long been recognized as significant contributors to the obesity epidemic, and the related health consequences of diabetes, cardiovascular disease, and degenerative joint disease.

This clinic looks and feels different than most. A round of hugs is followed by laughter and small talk. As the patients gather in the auditorium, it's clear they want to be there. The spirit is more like a family reunion than a doctor's visit. Most are low-income, don't exercise, and fight daily temptations of

soda, fast food, and tortillas. The nurse checks weights and blood pressures, and staff chat with patients as they check in. The patients pull up chairs to listen to Friedman as he welcomes the group and launches into an educational session on the health consequences of obesity and the lifestyle changes that can help them lose weight and get healthy. Soon enough, the patients are up and out of their chairs and bopping to music as staff lead them through a high energy, low-impact exercise routine.

provides the opportunity to learn from each other as a multidisciplinary team of specialists, nutritionists, and primary care clinicians offer high quality education. Registered dietician Elizabeth Driscoll teaches group members about calorie counting, portion size, and healthy food choices. She also works individually with patients to set personal lifestyle goals. A partner program, Champions for Change, provides a cooking demonstration, healthy snack, and cookbooks in Spanish and English. "It's empowering to walk into a room and see 20 other people who experience the same health challenges," Driscoll said. "It helps patients recognize that they are not alone."

In the traditional delivery model, patients vie for limited numbers of individual appointment slots. The harried day leaves little time to health care professionals expand on important lifestyle interventions or to help patients set individual goals. The nontraditional group format of the POW-ER visit allows 20 or more patients to have extended time with a multidisciplinary panel of health care providers. Health experts say group clinics like this one will grow in the future with provider shortages and increased demand for services as more people gain insurance under Obamacare. Proponents say the group model produces better outcomes than standard format because it combines traditional clinical care with peer support. An individual health care team can service more patients in the same amount of time. The group visit format does pose some challenges. The main concern is the loss of privacy as patients discuss their own health in front of their peers. The POWER team has been sensitive to these concerns with a detailed written consent that all participants must

(See 'POWER' on back)



By Michael Wilson

DHS and SEIU 721 leaders sent a message to health care workers last month:

get vaccinated against flu now to stay healthy.

DHS is part of a national coalition of health agencies working to improve workforce immunization rates through management and labor partnership. At a news conference held at LAC+USC Medical Center, County health officials and labor leaders urged health workers to get vaccinated to protect patients and themselves.

Influenza is a respiratory illness that generally whips up in January but can begin as early as October and continue as late as May. It can be especially harmful to children, the elderly, and those with chronic illnesses. Flu can lead to pa-

tient readmissions and reduced productivity among workers.

"Thousands of serious illnesses, hospitalizations and deaths can be prevented if Californians receive a flu vaccine as soon as possible," said California Department of Public Health director Ron Chapman. "Getting vaccinated now will help you and your family stay healthy.'

(See 'Vaccine' on back)



DHS Director Dr. Mitchell Katz receives a flu shot.

DHS Launches Patient-Centered Site

DHS Delivers Quality. Community-Based Care

By Michael Wilson

DHS unveiled a fresh, modern website this month to connect more easily with our patients and convey information more simply. The patient-centered design features a top navigation bar, pull-down menus, and geographic infor-

mation system that lets new patients type in a zip code to find nearby health facilities and receive driving directions. All DHS clinics and hospitals have landing pages with crisp images, standardized information, phone numbers, campus maps, and even bus routes. The new site is multilingual and uses simple language, and will be mobilefriendly in December. Officials say a key goal of the

new site is to promote DHS as an integrated health system and direct people towards establishing a clinic medical home. All pages have a consistent theme that reinforces unity within a multi-facility system. With one click, a user can return to the main homepage to access a myriad of other features.

"The healthcare system is already confusing

enough, so websites should be simple with the patient in mind," said DHS director Dr. Mitchell Katz. "With the new website, DHS has taken a major step forward in helping County residents obtain the care they need, when they need it.'

> Other features of the new site include a pull down menu of major health care coverage options in an easy-to-understand format, a resources page, a jobs page for careerseekers, and a "Health Reform and You" tab where people can learn the basics of Obamacare. The website renovation was made possible from a \$100,000 grant from the

Blue Shield of California Foundation (BSCF), with additional support from the California Endowment. A design firm spent six months reviewing industry best practices and meeting with internal groups to create the design. The website is part of a multi-prong effort to improve customer service. To view the new

website, visit www.dhs.lacounty.gov. Wilkes to Lead ED Systems Innovations

Erin Wilkes, MD, MSHS, has joined Health Services Administration as director of Emergency Medicine, System Innovations and Quality to oversee improvements in DHS Emergency Departments and continuity of care. She will split her time between clinical work as an Emergency Medicine physician at Harbor-UCLA Medical Center and project work downtown.

She will focus on standardizing different practices across DHS' three Emergency Departments and align processes and care in tandem with the DHS division of Quality Improvement and Patient Safety and hospital quality directors. Among her projects will be to standardize initiation of medical screening exams (MSEs), open three episodic care clinics for patients requiring short-term follow up after emergency visits, and standardize triage and order sets related to the ORCHID implementation.

Wilkes says she doesn't see a problem moving between the high intensity Emergency Room environment and desk work. "The great thing is that I get to do direct patient care and also fix the larger system problems to improve that care. They inform each other equally,'

"The Emergency Department is unfortunately a gateway into our health system and is where we need better hand-off and continuity of care to



improve outcomes," said DHS director Dr. Mitchell Katz. "Erin's on-the-ground experience will be essential to do this work and I'm pleased to welcome her to the team.'

She earned a bachelor's degree from Colby College and medical degree from Columbia University. She began her internship in Surgery at Harbor-UCLA Medical Center and residency in Emergency Medicine at LAC+USC Medical Center. She completed a post-graduate fellowship in Research with a focus on quality in safety-net hospitals at UCLA. Her research area of interest is overtreatment.

DHS Embraces Data Governance

By Michael Wilson

Have you ever wondered about the millions of bits of data that's collected in DHS health facilities each year, and how that data is managed in order to make sound decisions for the health

DHS collects a staggering amount of data that's used for many purposes: to get reimbursed, to improve the quality of service delivery, to publically report quality information, to help make a decision about introducing a new service line or invest in the expansion of a health facility. Data drives much of what we do in health care, which is why DHS is taking the bold and necessary step in the direction of Data Governance.

Data Governance describes how an organization plans, defines, organizes, and executes the proper handling of its data assets uniformly and consistently so that a clinic in the San Fernando Valley, for example, is handling data in the same fashion as one in Long Beach.

Organizations that treat data assets like the 'Wild West' with lax authority are not going to be efficient, gain trust and credibility, or be in a competitive business very long. By contrast, organizations that treat data in a governed structure that is managed in a consistent and repeatable manner across the continuum of care will achieve improved patient outcomes.

With the implementation of ORCHID, eConsult, i2i patient registry, the Enterprise Patient Data Repository (EPDR), and other new information systems, the need to develop a formalized data management structure for our system is more important than ever.

With the help of outside experts, DHS is establishing a Data Governance structure and program to standardize the handling of data system-wide to guide sound decision making. A new Data Governance Steering Committee consisting of leadership from across our facilities is directing multiple workgroups in the first steps of this important process.

Please contact DataGovernance@dhs.lacounty.gov for additional details.

('Vaccine')



Harbor-UCLA's Dr. Ken Zangwill joined SEIU 721 workers to urge all healthcare workforce members to get vaccinated.

"Flu is one of the only illnesses where people know exactly when they got it," said Harbor-UCLA Medical Center infectious disease expert Dr. Ken Zangwill, explaining the sudden onset of headache, fever, muscle aches and classic signs of the flu bug. He said the vaccine is about 80% effective against

Only 60% of DHS employees got vaccinated against flu last year, a rate DHS leaders hope to improve this year with the help of SEIU 721 front-line workers. DHS policy requires all employees to get vac-cinated or submit a declination form. Workers who refuse vaccination must wear a mask within 3 feet of a patient.

The federal Centers for Disease Control and Prevention (CDC) recommend anyone 6 months of age and older to get a flu vaccine.

Tips to Fight Flu

- Get vaccinated by your health provider or contact Employee Health Services at your DHS facility for free vaccination.
- Stay home when you are sick to avoid spreading illness to co-workers and friends.
- Cough or sneeze into your arm or a tissue and properly dispose of used tissues.
- Wash your hands thoroughly with soap and warm water or use an alcohol-based hand sanitizer to get rid of most germs and avoid touching your eyes, nose and mouth.
- Stay healthy by eating a balanced diet, drinking plenty of water and getting adequate rest and exercise.

('POWER')

sign as well as a disclaimer to respect privacy offered at the beginning of each session. "The group clinic turns the traditional model of the provider visit upside down," said Friedman, "and sometimes you build something better by tearing the old down. It doesn't make sense to schedule 25 individual appointments when you have 25 people with the same basic medical problems who can benefit from individual attention with social support in one setting." Patients feel empowered when they are with other people facing the same health challenges. "In a clinic visit we are so time pressured spending time on what they shouldn't do. We need to explore how to enrich the lives of these patients by focusing more on what they should do," said POWER organizer Jasmine Eugenio, MD. She sees a special alchemy happen in group sessions, which is part traditional medicine, part physical activity, and part supportive therapy. Patients learn from each other and are more open to sharing their challenges, failures, and successes. Maria Alvarez, who lost 40 pounds since joining the POWER group, isn't worried about privacy concerns or confessing to the group how she strayed off her diet last week. She just wants to feel better and supported. With the help of her peers and the guidance of the POWER team, she can do it.

FAST FACTS From Dr. Katz Editor

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